From-TROUTMAN SANDERS

T-520 P.005/014 F-353

SEP 1 6 2004

PTO/58/22 (0d-04)
Approved for uses through 07/31/2004 OMB 0931-0931
U.S. Parent and Tredumerh Offices U.S. DEPARTMENT OF COMMERCE
Correction of information unlesse if displaye a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)							Docket Number (Optional) ACRY3			
Application Number: 09/752,939				Filed. Dece						
For: GI	BBINS,	Bruce L.	टर धो.							
Art Unit	Art Unit: 1615				Examiner: Ghaili, Isis A.D.					
This is a applicati		ander the	provisions of 37 CFR 1.136(a)	to extend the pe	riod for filing a rep	aly in the u	bove identified			
The requ	uested ex	tension a	and fee are as follows (check tym	e period desired	and enter the appro	opriate fee	below)			
	Fre Sn					Small En	ll Entity Fee			
		\boxtimes	One month (37 CFR 1.17(a)((1))	\$110	9	\$55	\$ <u>55.00</u>		
		=	Two months (37 CFR 1 17(a		\$420	\$	210	\$		
		$\overline{\Box}$	Three months (37 CFR 1.17(\$95D	\$	475	S		
		\Box	Four months (37 CFR 1.17(a		\$1480	\$	740	\$		
			Five months (37 CFR 1.17(a)		\$2010	\$1	1005)\$ \$		
Ø			Арр	licant claims sm	all entity status. Se	ee 37 CFR	. 1 27.			
		A check	k is in the amount of the fee is e		•					
		Paymer	nt by credit card. Form PTO-20							
		The Director has already been authorized to charge fees in this application to a Deposit Account								
	×	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1507. I have enclosed a duplicate copy of this sheet								
		WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
	I am th	n the spplicant/inventor.								
		assignee of record of the entire interest. See 37 CFR 3.71.								
		Statement under 37 CFR 3.73(b) is enclosed. (Form PTS/SB/96)								
		☑ attorney or agent of record Registration number 39.771.								
		attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34.								
		September 16, 2004					DR			
		Dat	¢			ای ز	ignature			
							hony Merchant, Ph.D.			
		Telephone Number Typed or printed name								
	NOTE: Signatures of all the inventors or assignoes of record of the entire interest or their representative(s) are required. Submit									
	multiple forms if more than one signature is required, see below.									
	_ ™	atal of 1	forms are submitted.	•						

This collection of information is required by 37 CFR 1 136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U S C 122 and 37 CFR 1 14. This collection is estimated to take 06 manufes to complete, including genering, preparing, and submitted application form to the USPTO. Time will vary depending upon the individual rese. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this builder, should be sent to the Chief Information Officer, U.S. Patent and Tradenark office, U.S. Department of Commerce, P.O. Box 1450. Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Comandosumer for Patents, F.O. Box 1450, Alexandria, VA 22313-1450.

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T-520 P.004/014 F-353

PTO/SB/17 (10-03)
Approved for use through 07/31/06. OMB 0651-0032
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FFF TO ANOMITTAL	Complete If Known					
FEE TRANSMITTAL	Application Number	09/752,939				
for FY 2004	Filing Date	December 29, 2000				
	First Named Inventor	GIBBINS, Bruce L				
Ettective 01/01/03, patern tees are subject to annual revision	Examiner Name	Ghaib, Isis A.D.				
Applicant claims small entity status See 37 CFR 1.27	Art Unit	1615				
TOTAL AMOUNT OF PAYMENT (\$)64.00	Aπorney Docket No.	ACRY3				

METHO	FEE CALCULATION (continued)											
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order					3. ADDITIONAL FEES							
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Claims Fee from Fee Paid					480	2502	240	Design some for				
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SUBMITTED BY					Complete (if applicable)							
Name (Prigi/Type) Mary Anthony Merchant, Pn D					Registratio		39.77		Telephone			
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